

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Minnesota - Federal**

Full Name (Last, First, Middle Initial)

**A. Justin Gillette**

Mailing Address 4605 1st Avenue S

City

Minneapolis

State

MN

Zip Code

55419-5601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Medical Systems

Occupation

Environmental Health & Safety Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334

Date of Receipt

02 / 19 / 2015

**Transaction ID : 475841-966835-c**

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**B. Joseph Green**

Mailing Address 4631 Bruce Avenue

City

Edina

State

MN

Zip Code

55424-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TCF

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650

Date of Receipt

02 / 20 / 2015

**Transaction ID : 31791-965639-c**

Amount of Each Receipt this Period

650

Full Name (Last, First, Middle Initial)

**C. Glenn Gruenhagen**

Mailing Address 16367 441st Avenue

City

Glencoe

State

MN

Zip Code

55336-5124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gruenhagen Insurance

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210

Date of Receipt

02 / 27 / 2015

**Transaction ID : 486073-966380-c**

Amount of Each Receipt this Period

30

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

930.00